



Complete Summary

TITLE

Surgical care improvement project: percent of surgery patients with appropriate hair removal.

SOURCE(S)

Specifications manual for national hospital inpatient quality measures, version 3.0c. Centers for Medicare & Medicaid Services (CMS), The Joint Commission; 2009 Oct 1. various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percent of surgery patients with appropriate* surgical site hair removal.

*No hair removal, or hair removal with clippers or depilatory is considered appropriate. Shaving is considered inappropriate.

RATIONALE

Studies show that shaving causes multiple skin abrasions that later may become infected. In a randomized study of 1,980 adult patients undergoing cardiopulmonary bypass surgeries, Ko et al. (1992) reported a significantly higher rate of infection among patients who were shaved with a razor than those who had hair removal by electric clippers before skin incision. In another randomized trial of 200 patients undergoing elective inguinal herniorrhaphy, Balthazar et al. (1982) concluded that hair removal with electric clippers immediately prior to the

procedures "did not increase the risk of postoperative wound infection." In a systematic literature review by Kjonniksen et al. (2002), there was no strong evidence to contraindicate preoperative hair removal; however, there was strong evidence against hair removal with a razor. This review recommended depilatory or electric clippers immediately prior to surgery when hair removal was required. Alexander et al. (1983) reported that clippers, used on the morning of surgery, resulted in reduced surgical site infections and healthcare expenditures.

PRIMARY CLINICAL COMPONENT

Surgical care infection prevention; surgical site hair removal

DENOMINATOR DESCRIPTION

All selected surgery patients (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary and Appendix A, Table 5.10 for the list of selected surgeries)

NUMERATOR DESCRIPTION

Surgery patients with surgical site hair removal with clippers or depilatory or with no surgical site hair removal

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A systematic review of the clinical literature
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Alexander JW, Fischer JE, Boyajian M, Palmquist J, Morris MJ. The influence of hair-removal methods on wound infections. Arch Surg 1983 Mar;118(3):347-52. [PubMed](#)

Balthazar ER, Colt JD, Nichols RL. Preoperative hair removal: a random prospective study of shaving versus clipping. South Med J 1982 Jul;75(7):799-801. [PubMed](#)

Kjonniksen I, Andersen BM, Sondenaa VG, Segadal L. Preoperative hair removal--a systematic literature review. AORN J 2002 May;75(5):928-38, 940. [35 references] [PubMed](#)

Ko W, Lazenby WD, Zelano JA, Isom OW, Krieger KH. Effects of shaving methods and intraoperative irrigation on suppurative mediastinitis after bypass operations. Ann Thorac Surg 1992 Feb;53(2):301-5. [PubMed](#)

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Collaborative inter-organizational quality improvement
External oversight/Medicaid
External oversight/Medicare
Internal quality improvement
National reporting
Pay-for-performance

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

See the "Rationale" field.

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All selected surgery patients, age 18 years and older

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Discharges, 18 years of age and older, with an International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Principal Procedure Code of selected surgeries as defined in the appendices of the original measure documentation

Exclusions

- Patients less than 18 years of age
- Patients who have a Length of Stay (LOS) greater than 120 days
- Patients whose ICD-9-CM principal procedure was performed entirely by *Laparoscope*
- Patients enrolled in clinical trials
- Patients whose ICD-9-CM principal procedure occurred prior to the date of admission
- Patients who performed their own hair removal

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Institutionalization
Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Surgery patients with surgical site hair removal with clippers or depilatory or with no surgical site hair removal

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Institutionalization

DATA SOURCE

Administrative data
Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

SCIP-Inf-6: surgery patients with appropriate hair removal.

MEASURE COLLECTION

[National Hospital Inpatient Quality Measures](#)

MEASURE SET NAME

[Surgical Care Improvement Project \(SCIP\)](#)

SUBMITTER

Centers for Medicare & Medicaid Services
Joint Commission, The

DEVELOPER

Centers for Medicare & Medicaid Services/The Joint Commission

FUNDING SOURCE(S)

All external funding for measure development has been received and used in full compliance with The Joint Commission's Corporate Sponsorship policies, which are available upon written request to The Joint Commission.

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

The Centers for Medicare & Medicaid Services assembled and maintained the Technical Expert Panel for development of the Surgical Infection Prevention Project (SIP) measures in 2002. The SIP set subsequently transitioned to the Surgical Care Improvement Project (SCIP) effective July 1, 2006. The panel has been maintained by the Centers for Medicare & Medicaid Services since the inception of the project.

SCIP Partners include the Steering Committee of 10 national organizations who have pledged their commitment and full support for SCIP:

- Agency for Healthcare Research and Quality
- American College of Surgeons
- American Hospital Association
- American Society of Anesthesiologists
- Association of Perioperative Registered Nurses
- Centers for Disease Control and Prevention
- Centers for Medicare & Medicaid Services
- Institute for Healthcare Improvement
- The Joint Commission
- Veterans Health Administration

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Expert panel members have made full disclosure of relevant financial and conflict of interest information in accordance with the Conflict of Interest policies, copies of which are available upon written request to The Joint Commission and the Centers for Medicare & Medicaid Services.

ENDORSER

National Quality Forum

INCLUDED IN

Hospital Compare
Hospital Quality Alliance

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2006 Jun

REVISION DATE

2009 Oct

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Specifications manual for national hospital quality measures, version 2.5b. Centers for Medicare & Medicaid Services (CMS), The Joint Commission; 2008 Oct. various p.

SOURCE(S)

Specifications manual for national hospital inpatient quality measures, version 3.0c. Centers for Medicare & Medicaid Services (CMS), The Joint Commission; 2009 Oct 1. various p.

MEASURE AVAILABILITY

The individual measure, "SCIP-Inf-6: Surgery Patients with Appropriate Hair Removal," is published in "Specifications Manual for National Hospital Inpatient Quality Measures." This document is available from [The Joint Commission Web site](#). Information is also available from the [Centers for Medicare & Medicaid Services \(CMS\) Web site](#). Check The Joint Commission Web site and CMS Web site regularly for the most recent version of the specifications manual and for the applicable dates of discharge.

COMPANION DOCUMENTS

The following are available:

- A software application designed for the collection and analysis of quality improvement data, the CMS Abstraction and Reporting Tool (CART), is available from the [CMS CART Web site](#). Supporting documentation is also available. For more information, e-mail CMS PROINQUIRIES at proinquiries@cms.hhs.gov.
- The Joint Commission. A comprehensive review of development and testing for national implementation of hospital core measures. Oakbrook Terrace (IL): The Joint Commission; 40 p. This document is available from [The Joint Commission Web site](#).

- The Joint Commission. Attributes of core performance measures and associated evaluation criteria. Oakbrook Terrace (IL): The Joint Commission; 5 p. This document is available from [The Joint Commission Web site](#).
- Hospital compare: a quality tool provided by Medicare. [internet]. Washington (DC): U.S. Department of Health and Human Services; 2009 Oct 5; [accessed 2009 Oct 12]. This is available from the [Medicare Web site](#). See the related [QualityTools](#) summary.

NQMC STATUS

This NQMC summary was originally completed by ECRI on May 8, 2007. This NQMC summary was updated by ECRI Institute on October 26, 2007. The Joint Commission informed NQMC that this measure was updated on June 30, 2008 and provided an updated version of the NQMC summary. This NQMC summary was updated accordingly by ECRI Institute on December 11, 2008. The information was verified by the Centers for Medicare & Medicaid Services on March 19, 2009. The Joint Commission informed NQMC that this measure was updated again on October 1, 2009 and provided an updated version of the NQMC summary. This NQMC summary was updated accordingly by ECRI Institute on December 9, 2009. The information was verified by the Centers for Medicare & Medicaid Services on February 18, 2010.

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